

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

09-0012

FLORIDA DEPARTMENT OF STATE  
Katherine Arrington  
Secretary of State  
DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 23 2000 8:00 am  
Secretary of State

1. Corporation Name  
**JULIO M. MELENDEZ, PROFESSIONAL ASSOCIATION**

Mailing Address

3381 ROSE STREET  
SARASOTA FL 34239



2. New Principal Office Address, If Applicable <b>2036 PINE TERRACE</b>		3. New Mailing Office Address, If Applicable <b>P.O. BOX 49885</b>		4. Date Incorporated or Qualified To Do Business in Florida <b>11/13/1997</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number <b>65-0790331</b>	
City & State <b>SARASOTA, FL</b>		City & State <b>SARASOTA, FL.</b>		Applied For	
Zip <b>34231</b> Country <b>USA</b>		Zip <b>34230-6885</b> Country <b>USA</b>		Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$8.75 Additional Fee required for a Certificate of Status	

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	MELENDEZ, JULIO M	3381 ROSE STREET	SARASOTA FL 34239
			<div data-bbox="1002 1056 1505 1142"> <div>200003196262--2</div> <div>-04/05/00--01013--001</div> <div>****308.75 ****308.75</div> </div>

**9. Name and Address of New Registered Agent**

Name **HERMAN PINTZOW**

Street Address (P.O. Box Number is Not Acceptable)  
**3223 N. LOCKWOOD RIDGE RD #198**

Suite, Apt. #, Etc.  
**#198**

City **SARASOTA**

State <b>FL</b>	Zip Code <b>34234</b>
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Signature of Registered Agent Herman 941-727-5225 Date 1/6/00  
REGISTERED AGENT MUST SIGN

SIGNATURE: Julio M. Melendez 1/6/00 941-727-5225  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/99)

0082092 AF

pg 2 of 2  
Attachment

January 6, 2000  
Florida Department of State:  
Application for Reinstatement:

Julio M. Melendez, Professional Association  
Document # P97000096753

To Whom It May Concern:

I would like to inform you that I did not receive my 1999 Corporation Annual Report Form for 1999.

Per our telephone conversation I had the following addresses in Sarasota during 1999.

3381 Rose Street  
2650 Wood Street  
6260 N. Lockwood Ridge Road  
2602 Pine Lake Terrace  
2034 Pine Terrace

The Notice of Administrative Dissolution was Addressed to "3381 Rose St. Sarasota, FL 34239". The Post Office put it in my Post Office Box, 49885, Sarasota, FL 34230-6885. (Copy Enclosed). My current Address is 2036 Pine Terrace, Sarasota, FL 34231, **For the next 3 months.**  
**Please send mail to P.O. Box 49885, Sarasota, FL 34230-6885.**

Also per telephone conversation I am requesting that you grant me a one-time waiver.

Enclosed find application for Reinstatement with changes along with a check in the amount of \$308.75, for:

150.00- 1999 fee  
150.00- 2000 fee  
8.75- Cert. Of Status, total \$308.75

Thank you,

*Julio M. Melendez*